

### Commentary

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The rapid increase in the incidence of skin cancer has led to greater interest in the primary medical practice role for prevention. In the absence of good data to suggest that secondary prevention—that is, early detection of melanomas or squamous or basal cell carcinomas—is worthwhile,<sup>1</sup> it has been hoped that primary prevention—avoiding sunlight—will prove effective. Previous doubts that the use of sunscreen creams (a popular form of primary prevention) actually prevent skin cancer<sup>2</sup> and the possibility that they might even be harmful make a well-designed intervention trial welcome.

The study by Green and colleagues showed that neither oral  $\beta$ -carotene use nor topical sunscreen cream was harmful in the short term. The lack of evidence of benefit suggests that the use of sunscreen to prevent basal cell cancer and of  $\beta$ -carotene supplements to prevent both basal and squamous cell cancer is not effective. However, 2 of the 4 groups ( $\beta$ -carotene use alone and placebo alone) not assigned to use sunscreen were contaminated; 26% of these patients used sunscreen, a fact that would dilute any real effect and reduce the power of the study. Time may confirm a possible benefit of sunscreen use on basal cell cancer because the authors promise to follow up the cohort.

The evidence for the benefit of sunscreen use for incident squamous cell carcinomas of the magnitude of 40% suggests that we should recommend that patients—even middle-aged people—use sunscreen combined with other forms of sun avoidance in sunny climates.

1 Feightner JW. Prevention of skin cancer. In: The Canadian Task Force on the Periodic Health Examination. *The Canadian Guide to Clinical Preventive Health Care*. Ottawa: Minister of Supply and Services Canada; 1994:849-859.

2 Do sunscreens prevent skin cancer? *Drug Ther Bull* 1998;36:49-51.